

Department of Medical Assistance Services 600 East Broad Street, Suite 1300 Richmond, Virginia 23219

www.dmas.virginia.gov

MEDICAID MEMO

TO: All Personal Care and Respite Care Providers participating in the Home and Community

Based Waiver Program with the Virginia Medical Assistance Programs

FROM: Gregg A. Pane, MD, MPA, Director MEMO: Special

Department of Medical Assistance Services (DMAS)

DATE: 9/9/2010

SUBJECT: Licensing Requirements for Personal Care and Respite Care Agencies Not Otherwise

Licensed by DBHDS or VDSS — This memo replaces the Changes to the Licensing Requirements for Hospice, Personal Care, and Respite Care Providers

Memo, dated August 4, 2010.

This memorandum provides further clarification regarding licensing requirements and replaces the Changes to the Licensing Requirements for Hospice, Personal Care, and Respite Care Providers Memo (which was originally dated August 4, 2010). References to hospice providers have been removed as this Memorandum does not apply to them. It also clarifies that providers previously licensed by DBHDS are exempt from the process described in this Memorandum. The previous version of this Memorandum has been removed from the Department of Medical Assistance Services (DMAS) Website.

The purpose of this memorandum is to notify you of recently adopted legislation related to the licensure of personal and respite care agency providers and their participation in the Virginia Medicaid Program with DMAS.

Newly enacted legislation requires personal care agencies, respite care agencies, and home care providers to be licensed by the Virginia Department of Health (VDH) as a Home Care Organization unless they meet the applicable exemptions stated in §32.1-162.8 for home care organizations. The exemptions include: 1) Certification by the Virginia Department of Health under provisions of Title XVIII or Title XIX of the Social Security Act; and 2) Accredited by any organization recognized by the Centers for Medicare and Medicaid Services for the purposes of Medicare certification.

Licensing must occur no later than July 1, 2012. Providers licensed by the Virginia Department of Behavioral Health Services (DBHDS) or by the Virginia Department of Social Services (VDSS) as a foster care home for children are not required to seek additional licensure as a home care organization through VDH.

Prior to July 1, 2012 you must submit a copy of your Home Care Organization license (accreditation or Medicare Certification) to ACS Provider Enrollment Services in order to continue your participation as a Medicaid provider. A provider renewal request will be mailed to your organization 90 days prior to your current expiration date of June 30, 2012 with instructions for submitting a copy of your Home Care Organization license with ACS Provider Enrollment Services. ACS Provider Enrollment Services Unit handles all provider enrollment tasks for DMAS.

If you have not already obtained your Home Care Organization license, you must apply to the VDH Office of Licensure and Certification no later than January 1, 2011. All new personal and respite care agency providers

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not otherwise licensed by DBHDS or VDSS must be licensed as a Home Care Organization in the Commonwealth of Virginia and will need to provide proof of licensure prior to enrolling with DMAS to become a Medicaid provider. For more information on obtaining your Home Care Organization license, please contact:

Virginia Department of Health Office of Licensure and Certification 9960 Mayland Dr., Suite 401 Richmond, VA 23233-1463 Telephone: 804-367-2104 Fax: 804-527-4504

www.vdh.state.virginia.gov/olc

Failure to obtain licensure or certification will result in the loss of participation in the Medicaid program and discontinuation of Medicaid payments to providers until such time as the appropriate licensure and/or certification requirements are met.

Please contact ACS Provider Enrollment Services at 1-888-829-5373 should you have any additional questions regarding the provider enrollment process.

VIRGINIA MEDICAID WEB PORTAL

DMAS offers a web-based Internet option to access information regarding Medicaid or FAMIS member eligibility, claims status, check status, service limits, service authorizations, and electronic copies of remittance advices. Providers must register through the Virginia Medicaid Web Portal in order to access this information. The Virginia Medicaid Web Portal can be accessed by going to: www.virginiamedicaid.dmas.virginia.gov. If you have any questions regarding the Virginia Medicaid Web Portal, please contact the ACS Web Portal Support Helpdesk, toll free, at 1-866-352-0496 from 8:00 A.M. to 5:00 P.M. Monday through Friday, except holidays. The MediCall audio response system provides similar information and can be accessed by calling 1-800-884-9730 or 1-800-772-9996. Both options are available at no cost to the provider.

ELIGIBILITY VENDORS

DMAS has contracts with the following eligibility verification vendors offering internet real-time, batch and/or integrated platforms. Eligibility details such as eligibility status, third party liability, and service limits for many service types and procedures are available. Contact information for each of the vendors is listed below.

Passport Health Communications,	SIEMENS Medical Solutions – Health	Emdeon
Inc.	Services	www.emdeon.com
www.passporthealth.com	Foundation Enterprise Systems/HDX	Telephone:
sales@passporthealth.com	www.hdx.com	1 (877) 363-3666
Telephone:	Telephone:	
1 (888) 661-5657	1 (610) 219-2322	

"HELPLINE"

The "HELPLINE" is available to answer questions Monday through Friday from 8:30 a.m. to 4:30 p.m., except on state holidays. The "HELPLINE" numbers are:

1-804-786-6273 Richmond area and out-of-state long distance 1-800-552-8627 All other areas (in-state, toll-free long distance)

Please remember that the "HELPLINE" is for provider use only. Please have your Medicaid Provider Identification Number available when you call.